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05/27/2005

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(Depositor's name (Signature) (Date

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/766,846 01/30/2004 Mailvaganam Mahendran 4320-529 4139

TITLE OF INVENTION: METHOD OF POTTING HOLLOW FIBER MEMBRANES HOLLOW FIBRE MEMBRANES APPARATUS INCORPORATING POTTEN HOLLOW FIBRE MEMBRANES

APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 08/29/2005 EXAMINER ART UNIT CLASS-SUBCLASS FORTUNA, ANA M 1723 210-209000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Oakville, CANADA		·						
FORTUNA, ANA M 1723 210-209000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)	APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PU	BLICATION FEE	TOTAL FEE(S) DUE	DATÉ DUE	
FORTUNA, ANA M 1723 210-209000 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents OR agents or agents or agents or agents or agents or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)	nonprovisional	NO	\$1400		\$300	\$1700	08/29/2005	
2. For printing on the patent front page, list Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Clamber of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. CASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file-recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 2 For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents an amember a registered attorneys or agents and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3 PERESKIN & PARR 1 BERESKIN & PARR 2 For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents or agen	- EXAMINER		ART UNI	T CL	CLASS-SUBCLASS			
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/37; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (3) the names of up to 3 registered patent attorneys or agents OR, alternatively, (4) the names of up to 3 registered patent attorneys or agents OR, alternatively, (5) the name of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)	FORTUN	A, ANA M	1723		210-209000	_		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)	CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02	dence address (or Change of 22) attached. tion (or "Fee Address" Indic	Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is				
	PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified b n 37 CFR 3.11. Completion		`'	** /	gnee is identified below, the	document has been filed	
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Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): 🔀 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number __022095:___________(enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date Scott Pundsack 47,330 Typed or printed name

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TD 4 NO.4	OLE	Application Number	er	10/766,846						
TRANSM FOR	MALE VO	Filing Date		January 30, 2004						
FUR	NIN 2 1 2002 P. P. NIN	First Named Inven	tor	MAHENDRAN						
\	JUN 2 1 2005 25	Art Unit		1723						
(to be used for all correspond Total Number of Pages in This	lenceter initial fund	Examiner Name		FORTUNA, Ana M.						
Total Number of Pages in This	Submission 25	Attorney Docket N	umber	4320-529						
ENCLOSURES (check all that apply)										
Fee Transmittal Form	☐ Drawing(s	Drawing(s)		After Allowance Communication to TC						
Fee Attached	Licensing	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences						
Amendment / Reply	Petition	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final	ı —	Convert to a all Application		Proprietary Information						
Affidavits/declaration(Attorney, Revocation f Correspondence Add	ress	Status Letter						
Extension of Time Reque	st Terminal (Disclaimer		Other Enclosure(s) (please identify below):						
Express Abandonment Re	equest	or Refund per of CD(s)		Issue Fee including Part B - Fee(s) Transmittal in duplicate						
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Certified Copy of Priority Document(s)	Remarks		-							
Reply to Missing Parts/ Incomplete Application										
Reply to Missing Part under 37 CFR1.52 or										
	SIGNATURE OF A	APPLICANT, ATTOR	RNEY, OF	RAGENT						
Firm	Bereskin & Parr	Bereskin & Parr								
Signature	Scale	Scot Rudsov								
Printed Name	Scott Pundsack	Scott Pundsack								
Date	June 23, 2005		Reg. No.	47,330						
	CERTIFICA	TE OF TRANSMISS	ION/MAI	LING						
I hereby certify that this correspond to Service with sufficient posta Alexandria, VA 22313-1450 or	ge as first class mail in	simile transmitted to the an envelope addres	e USPTO sed to: C	or deposited with the United States Postal ommissioner for Patents, P.O. Box 1450,						
Signature										
Typed or printed name				Date						

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Bereskin & Parr

INTELLECTUAL PROPERTY LAW

June 23, 2005



Scott R. Pundsack B.A.Sc. (Civil Eng.), LL.B. 416 957 1698 spundsack@bereskinparr.com

Our Reference: 4320-529

ISSUE FEE

Mail Stop Issue Fee The Commissioner of Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 U.S.A.

Dear Sir:

Re: United States Patent Application No. 10/766,846

For: APPARATUS INCORPORATING POTTED HOLLOW FIBRE MEMBRANES

Filed: January 30, 2004

Applicants: MAHENDRAN et al.

This correspondence is responsive to the Notice of Allowance and Fee(s) Due dated May 27, 2005, in the above-noted patent application. As required, we enclose herewith the Issue Fee Transmittal forms.

The government fee of \$1,700.00 is included in our firm's cheque. Please charge any deficiency or credit any overpayment to our deposit account No. 02-2095.

Respectfully submitted,

MAHENDRAN et al.

Scott Pundsack

Registration No. 47,330

Encl.